Springfield, MO 65807

(417) 890-0946

DYNAMICS GYMNASTICS REGISTRATION FORM

Students Name:		Birthday:	/	_/	Sex:	F M
Home Address:			City:			
State: Zip: Phone:	Email:					
How did you hear about Dynamics Gymnastics?						
PARENT/GUARDIAN INFORMATION						
Mother's Name:		_ Work/Cell:				
Father's Name:						
Family Doctor:						
Medical Conditions, if any:						
TERM	S AND CONDITIONS					
*Please initial each line. DYNAMICS TUITION FEE is payable on or before the 1st Discover cards. Tuition can be mailed to 2100 E Pythian St., Sprin Tuition can be called in over the phone using a credit card number 5th by checking account. Ask the office for more information. A Agency and you will be responsible for paying Collection Fee ANNUAL REGISTRATION FEE is non-refundable and m calendar year. DROPPING CLASS is permitted only by filling out a form coach is NOT sufficient). Dropping will NOT reserve your class spmonth. TRANSFERRING CLASS is available anytime throughout the coach is NOT sufficient. There are NO REFUNDS, DISCO make-up class. Open gym can be used for a make-up, or a reduct scheduled if account is not current. You can NOT use make-ups	ngfield, MO 65802. Please. Automatic payment is counts that are 30 day is in addition to any balanust be paid along with the at the front desk before pace. If class is not dropped the year. Please contained rate for Parent' Night of the page of the parent' Night of the page of the	se make checks s on the 1st of e s past due are s ance you owe E e first month's tu e the 1st of the m bed before the 1st ct the office to an f the child is abe Out can be used	payable to ach month subject to Dynamics of ition for EA nonth inten of the mo rrange tran sent. Confor a make	Dynamics on by either being sent Gymnastics. CH student ded on drop on the tuition is sfers.	Gymnastic credit car to a Colle s. and is du oping (telli s applied ce to scheel-ups will n	ection ng a for that
	CAL RELEASE FORM					
 I give my approval for the above named student(s) partic I hereby forever waive, and forever release and discharged from all liability for any and all damages and injuries sufficient equipment, instructors and facilities. As a student or parent or guardian of a student, I undershave been encouraged to do so by Dynamics Gymnastics. 	ge Dynamics Gymnastics fered by the participant in stand that it is my option to cs.	s, LLC and their connection with	officers, directions and use of the said use o	ectors, emp f the aforen surance of	loyees and nentioned proper hea	alth and
 I authorize the representatives of Dynamics Gymnastics during any gymnastics activity at or for Dynamics Gymnatics I understand that participation is entirely by my own choinjury, paralysis and even death in any activity involving Dynamics Gymnastics is not responsible, whatsoever, for classes. 	astics. ice and with the understa unusual motion or height	anding that there	are risks a	nd the poss	ibility of a	ccidental
I do hereby verify that I have read, understand & accept	each of the above po	olicies, terms a	nd condi	tions sho	wn by m	У